

TRANSCRIPT REQUEST FORM

UNDERGRADUATE REGISTRAR'S OFFICE 213 WHITMORE ADMINISTRATION BUILDING UNIVERSITY OF MASSACHUSETTS 181 PRESIDENTS DRIVE AMHERST, MA 01003-9313

voice 413.545.0555 fax 413.545.2920 email: regtrans@registrar.umass.edu

STUDENT INFORMATION

Current Name	Last	First	NA: al all a
Former Name (if applic		First	Middle
			_
Student ID# or SS#		Date of Birth	
Email Address		Telephone Number	
Dates of Attendance_			
Current Mailing Addres	SS		
			•
TDANCODIDT INF	,		•
TRANSCRIPT INFORMATION (please allow 3-5 business days for processing)			
Official Transcript		Unofficial Transcript	
Number of Transcripts *You can have your unofficial		*You can have your unofficial transcripts	s faxed, fill out below:
		Fax #	
Transcript(s) will be pic	cked up		
Of Mail Transcript(s) to:	*** actual mailing time can to	ke up to <u>two weeks</u> to reach the desti	nation***
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OR , hold request and			
mail transcript(s) after	Fall grades recorded	Spring grades recorded	
	Winter grades recorded	Summer grades recorded	
	Degree awarded on trai	nscript	
Student Signature Required Date of Request			

Charges:

There is no fee for students who have entered the University as of September 1990 or later. If you entered the University prior to September of 1990, there is a service fee of \$6.00 for each Official transcript.